Trillium Gift of Life Network

2016-2017 BUSINESS PLAN

Trillium Gift of Life Network

Réseau Trillium pour le don de vie

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Executive Summary

Fiscal year 2014/15 was a year of significant achievement in organ and tissue donation and transplantation in Ontario, bolstering both TGLN's and Ontario's reputation as a national and emerging international leader in donation and transplantation. New records were set for organ and tissue donation and more Ontarians registered consent compared to the previous two years, all resulting in more lives being saved through transplantation. On the heels of a highly successful year, TGLN continues to build on this momentum and is aiming to further accelerate growth in donations and transplants to prevent unnecessary deaths on the transplant waiting list and reduce wait times for transplantation.

Implementation of learnings from Spain, a world leader in organ donation, continues to be a key area of focus for TGLN in 2016/17. Specifically, expanding the role and accountability and increasing education of critical care physicians in donation, and building a donation culture, key elements of the *Spanish Model*, are being adopted in Ontario.

Additionally, TGLN's multi-year (2016-2019) strategic priorities: (i) **significantly increase consent for organ and tissue donation,** (ii) **significantly enhance and optimize physician leadership in donation,** (iii) **normalize OTDT as a shared value across all sectors of Ontario society (general public and within healthcare)** and (iv) **develop an integrated, sustainable tissue donation and transplant system in Ontario** will significantly shape TGLN's focus in 2016/17.

TGLN will continue its work to improve and move forward on recommendations put forth to the Ministry of Health and Long-Term Care (MOHLTC) where it relates to TGLN's information technology (IT) services and provincial tissue program. Earlier in June 2015, at the Ministry's request, TGLN submitted a multi-year IT Renewal Plan to modernize TGLN's mission critical out-dated organ allocation information system.

Also, as requested by the MOHLTC, TGLN submitted in summer 2014, a report titled *Tissue Banking in the Province of Ontario: Review and Analysis*, outlining recommendations for system improvement to the tissue donation and transplant system for the province of Ontario that maximizes tissue donation. This business plan captures the directions and recommendations that fall within scope of TGLN's current mandate for 2016/17. System related recommendations and those that require a change to TGLN's role and additional multi-year work identified in the Report are not included in this Business Plan and will be addressed through a separate submission.

Similar to previous years, TGLN has proposed four overarching goals, composed of program and enabling goals as follows. Program goals are in direct support of achieving TGLN's mission, mandate and three-year strategic priorities; and enabling goals have a cross-functional impact and support realization of the program goals.

2016/17 GOALS

(1) Program Goals:

- **Support transplantation through effective oversight and collaboration with stakeholders.**
- **Maximize organ and tissue donation for transplantation in partnership with stakeholders.**
- **Build a strong organ and tissue donation culture in Ontario.**

(2) Enabling Goal:

- **Drive quality, innovation, efficiency and cost-effectiveness through process improvement, information technology and talent management.**

To achieve these goals, 7 objectives have been identified and similar to the goals, objectives are grouped as either program or enabling objectives:

2016/17 OBJECTIVES

(1) Program Objectives:

- **Develop an integrated care model that will be informed using clinical and patient reported outcomes which includes reporting 100% of patient outcomes by organ and site.**
- **Achieve a 58-61% provincial conversion rate, 271-290 organ donors and 3.57 organ yield per donor.**
- **Achieve a 44% consent rate, 2,200-2,400 ocular donors and 330-350 multi-tissue donations.**
- **Emphasize the value of organ and tissue donation and transplantation (OTDT) to all Ontarians through outreach and communications and inspire over 254,000 to register consent.**

(2) Enabling Objectives:

- **Enhance and sustain the quality management system that supports continuous quality improvement and meeting of quality standards.**
- **Enhance IT to drive innovation, improvement and efficiency at TGLN and in the broader donation and transplantation system.**
- **Attract, engage, develop and retain talented staff.**

Strategies and supporting high level action plans to achieve these objectives along with associated resource requests are delineated in this Business Plan.

Business Plan at a Glance

STRATEGIC PRIORITIES: 2016-2019			
Significantly increase consent for organ and tissue donation.	Significantly enhance and optimize physician leadership in donation.	Normalize OTDT as a shared value across all sectors of Ontario society (general public and within healthcare).	Develop an integrated, sustainable tissue donation and transplant system in Ontario.

GOALS	ANNUAL OBJECTIVES AND STRATEGIES			
SUPPORT TRANSPLANTATION THROUGH EFFECTIVE OVERSIGHT AND COLLABORATION WITH STAKEHOLDERS.	**Develop an integrated care model that will be informed using clinical and patient reported outcomes which includes reporting of 100% of patient outcomes by organ and site.**	**Achieve 58-61% conversion rate for provincial hospitals , 271-290 organ donors and 3.57 organ yield per donor.**	**Achieve a 44% consent rate, 2200-2400 ocular donors and 330-350 multi-tissue donations.**	**Emphasize the value of OTDT to all Ontarians through outreach and communications and inspire over 254,000 to register consent.**
	Develop a system performance measurement plan to evaluate, monitor and improve the quality of transplant services in Ontario.	Improve organ donation consent performance in order to maximize these opportunities across the province..	Increase the number of tissue referrals reported to TGLN.	Encourage culture change by enhancing grass roots advocacy, partnership and beneficial affiliations to extend TGLN's reach.
MAXIMIZE ORGAN AND TISSUE DONATION FOR TRANSPLANTATION IN PARTNERSHIP WITH STAKEHOLDERS.	In partnership with the Organ and Tissue Specific Working Groups, continue to develop and implement standardized best practices to improve patient care along the continuum.	Review staffing model to better align with donation case activity.	Increase the consent rate for tissue donation in order to maximize these opportunities across the province.	Optimize media relations and social media as a conduit for demonstrating the value of OTDT.
	Foster partnerships with patients and families to enhance the patient journey along the care continuum with the goal of improving patient knowledge and transplant outcomes.	Build on the success of the Donation Physician model to improve organ donation best practices.	Improve the capacity for ocular and multi-tissue recovery.	Optimize cost-effective marketing opportunities to promote the value of OTDT.
BUILD A STRONG ORGAN AND TISSUE DONATION CULTURE IN ONTARIO.		Collaborate with stakeholders to promote systemic improvements in organ donation.	Increase the number of cases that are approached and recovered.	Partner and collaborate with ServiceOntario to improve registration opportunities and ensure registration processes are optimal.
		Engage partners in working through system level barriers to maximize organ yield.	Continue advancement towards tissue system redesign.	Enhance corporate communication to support fulfillment of TGLN's objectives and mandate.
DRIVE QUALITY, INNOVATION, EFFICIENCY & COST EFFECTIVENESS THROUGH PROCESS IMPROVEMENT, REFORMS IN IT/ TECHNOLOGY AND TALENT MANAGEMENT.	Enhance and sustain the quality, safety and value of the donation and transplant system through the measurement, reporting and quality improvement of patient outcomes.	Enhance IT infrastructure, process improvement and efficiency in order to support the donation and transplant ecosystem.	Adopt a people-centered, results-based culture.	
	Build the foundation that defines TGLN's clinical-donation system.	Build resilient IT infrastructure by securing technology assets and provide exceptional customer service.	Adopt an integrated talent management approach that places behavioural competencies at the heart of the model; using them as a common thread through all HR practices and programs.	
	Increase the audit function to identify gaps and strengthen processes.	Deliver business objectives with project management , oversight and governance.	Develop a multi-year HR Plan to support TGLN in enhancing and sustaining a healthy, high-performing and productive work environment.	
	Deliver process improvement in targeted areas that offer opportunities to achieve greater efficiencies.	Implement TGLN's core system modernization project.	Strengthen recruitment, selection, orientation and onboarding processes so that TGLN can source and recruit appropriate skills and capabilities to meet organizational needs and accelerate new hire time-to-productivity.	
	Expand the quality management system to improve system monitoring.	Empower decision makers with data and tools.	Review and revise the performance planning and development practices and processes to incorporate a performance-based approach to compensation.	
			Develop and implement a robust recognition program that recognizes individual, team and organizational excellence.	

Mandate, Mission & Vision

Mandate:

1. Plan, promote, coordinate and support activities relating to the donation of tissue for transplant and activities related to education or research in connection with the donation of tissue.
2. Coordinate and support the work of designated facilities in connection with the donation and transplant of tissue.
3. Manage the procurement, distribution and delivery of tissue.
4. Establish and manage waiting lists for the transplant of tissue and for establishing and managing a system to fairly allocate tissue that is available.
5. Make reasonable efforts to ensure that patients and their substitutes have appropriate information and opportunities to consider whether to consent to the donation of tissue and to facilitate the provision of that information.
6. Provide education to the public and to the health-care community about matters relating to the donation and use of tissue and, facilitate the provision of such education by others.
7. Collect, analyze and publish information relating to the donation and use of tissue.
8. Advise the Minister on matters relating to the donation of tissue.
9. To do such other things as the Ministry may direct.

Mission:

Saving and enhancing more lives through the gift of organ and tissue donation and transplantation in Ontario.

Vision:

To be a world-class leader that enhances and saves lives through organ and tissue donation for transplantation.

Overview of Programs & Activities

TGLN's executes its broad mandate through the following interdependent programs and services.

- **Transplantation**
  Standardizing Practice, Equalizing Access and Measuring Outcomes

TGLN will build on its role for system planning and work with key stakeholders to plan and coordinate transplant services in Ontario. TGLN will work to enable equitable access through standardized processes and provincial waitlists, enabling performance outcome measurement to improve pre-transplant through to post-transplant care and developing evidence based initiatives to enhance the quality of care of transplant patients as they transition through the patient continuum.

- **Hospital Programs**
  Maximizing Donors in Ontario

Hospital Programs works with the 56 Ontario hospitals with Level III critical care services and 12 Ontario hospitals with Level II critical care services to establish and maintain successful organ and tissue donation programs within the hospital. This includes identifying opportunities for organ and tissue donation and employing donation best practices through the implementation of policies and procedures. Coordinators in the Provincial Resource Centre manage notification calls and coordinate case activity, while Organ and Tissue Donation Coordinators (OTDCs) provide on-site clinical support. In addition to real time support, TGLN's Donation Physician Model includes Hospital Donation Physicians and Regional Medical Leads who support physician practice across the province. Through education and feedback, TGLN's Hospital Development team work with hospitals to continuously drive performance improvement.

- **Provincial Resource Centre**
  24/7 Donation and Transplant Service to the Province

The Provincial Resource Centre (PRC) is responsible for intake of organ and tissue donation referrals and facilitates donation 24/7 working in close collaboration with OTDCs, donation hospitals, tissue banks and transplant hospitals. The PRC provides real-time case management, including: supporting health care professionals; obtaining consent for tissue donation; facilitating donor testing and screening; coordinating essential logistics; and offering organs and tissue to transplant programs and tissue banks respectively by telephone. In addition, Surgical Recovery Coordinators and Tissue Recovery Coordinators assist in the recovery of organs and enucleation of eyes respectively. The PRC operation is highly dependent on TGLN creating and sustaining customized databases, automated allocation algorithms, and real-time telecommunications that enable the time-limited and fragile end-to-end processes from donation to transplant.

- **Education & Professional Practice**
  Promulgating and Evaluating Best Practice in Donation

Education and Professional Practice is accountable for developing, coordinating, implementing and evaluating targeted education programs for healthcare professionals and TGLN employees involved in organ and tissue donation across the province, ensuring clinical practice is compliant with accepted best practices and established standards.

- **Communications**
  Building a Culture of Donation in Ontario to Increase Consent for Donation

TGLN's communications and public awareness efforts are broad, with the ultimate goal of increasing consent and making more organs and tissue available for transplant, As demonstrated by the Spanish Model, a "culture of donation" is encouraged by normalizing donation, an objective which is supported by communications and marketing. Registration is a key driver of consent as families of registered donors

are significantly more likely to give consent for donation, so registration is a primary call-to-action in TGLN communication. TGLN's multi-faceted approach to communications and public awareness includes social media, advertising, earned media, public relations and community relations. TGLN works with a diverse range of partners and stakeholders including government, volunteers, health care professionals, multi-faith leaders, youth, schools and universities, corporate and not-for-profit organizations. Additionally, corporate communications will be a new area of focus for the purposes of influencing the public, stakeholders and health care providers with a call to action to both increase registration and to collaboratively build a donation culture in Ontario.

- **Quality & Performance Improvement**
  Continuous Improvement and Regulatory Compliance

The Quality and Performance Improvement program is focused on enhancing and improving services to continually meet the needs of internal and external stakeholders. Quality and Performance Improvement rigorously monitors TGLN's compliance to Health Canada's *Safety of Human Cells, Tissues and Organs for Transplantation Regulations* and other applicable standards and utilizes proven quality methodologies and tools to identify opportunities for improvement.

- **Information Technology**
  TGLN's Business-Centric IT Service

IT provides operational and project services to TGLN. IT is involved in many aspects of the business of organ and tissue donation from running the systems that underlie the 24/7 Provincial Resource Centre; matching the donor to recipient; providing data to key stakeholders to make informed decisions; to creating new data points to measure quality of the entire system. In order to be more efficient in TGLN, IT also has a transformation mandate to automate manual tasks, and to modernize systems and their underlying processes.

- **Finance, Human Resources & Administration**
  Financial Transactions, HR Management and Government Directive Compliance

The Finance, Human Resources (HR) & Administration department is responsible for the management and administration of TGLN's finance, human resource and other administrative functions including: payroll and benefits; management of expenditures and disbursements and banking matters; management of facilities and insurance; handling of charitable donations; financial planning, budgeting and reporting; continuous monitoring against all existing and new Government Directives, recruitment, orientation and on-boarding, performance management, training, HR information and metrics; compensation; and development of policies and procedures to support staff and management, and the daily operations of the organization.

Furthermore, the Finance, HR & Administration department administers the Program for Reimbursing Expenses of Living Organ Donors (PRELOD) and the Transplant Patient Expense Reimbursement Program (TPER).

This year TGLN is launching a virtual Project Management Office (PMO). The virtual PMO will not manage projects but a play a supportive role with the goal to maximize successful implementation of projects at TGLN by enhancing project management capability through project management tools and improving communication on active projects being managed across the organization.

Environmental Scan

❖ **Adoption of Applicable Practices from Spain**

TGLN is driving improvements and increases in organ and tissue donation by implementing applicable learnings from Spain, the world's leading organ donation jurisdiction. Key opportunities for Ontario, based on learnings from the donation program in Spain, include: (i) Optimization of the Culture of Donation to Increase Consent; (ii) Improving Consent Practices; (iii) Physician Education & Engagement and (iv) Enhancement of the Hospital Donation Physician Role. These targeted areas for improvement continue to shape TGLN's work, including TGLN's new multi-year strategic priorities, as well as strategies and action plans in this Business Plan.

❖ **Canadian Blood Services (CBS)**

In collaboration with CBS, TGLN has implemented and operationalized the Highly Sensitized Patient (HSP) registry and National Organ Waitlist (NOW). The HSP registry was launched in 2014/15 and work continues to ensure HSP continues to meets evolving national and provincial needs. The work involved with national organ-sharing is highly complex and on-going work continues to maintain, and support the Canadian Transplant Registry (CTR), including NOW, HSP and the Kidney Paired Donation (KPD) program. TGLN expects continued collaboration and work with CBS to refine CTR and the web interfaces with provincial Organ Procurement Organizations (OPO) information systems, as well as monitor and manage impacts and implications of sharing kidneys nationally for highly sensitized patients.

❖ **Tissue Report**

At the request of the Ministry of Health and Long-Term Care (MOHLTC), TGLN developed a plan for a comprehensive tissue donation and transplantation system that maximizes tissue donation in the province of Ontario. The findings of this report and associated recommendations were shared with the MOHLTC. The tissue report has impacted TGLN's strategic direction in the development of a functional and cohesive, provincial tissue system. Accordingly, at the request of the MOHLTC, TGLN will assemble two working groups to collaborate and implement the recommendations in the report. This Business Plan reflects the direction and recommendations that fall in scope of the tissue report; however, the comprehensive recommendations that require a change to TGLN's role, and additional multi-year work identified in the Report are not included in this Business Plan.

❖ **Patient's First: Action Plan for Health Care**

TGLN's initiatives planned for 2016/17 align with the government's Patient's First: Action Plan for Health Care. TGLN is a "Patients First Agency"; it exists to serve the needs of patients waiting for life-saving organ transplants and life-improving tissue transplants. The focus on patients is embedded in TGLN's mission and more transplant and better outcomes for patients is at the core of TGLN's strategic objectives. Also, TGLN's strategies and action plans to integrate organ and tissue donation as part of quality end of life and a routine part of end of life care conversations supports and aligns with the government's commitment to improve quality of end-of-life care for Ontarians, as described in the 2014 Ontario budget.

Strategic Direction & High Level Implementation Plan

Fiscal year 2014/15 was a year of significant achievement in organ and tissue donation and transplantation in Ontario, bolstering both TGLN's and Ontario's reputation as a national and emerging international leader in donation and transplantation. New records were set for organ and tissue donation and more Ontarians registered consent compared to the previous two years, all resulting in more lives being saved through transplantation. On the heels of a highly successful year, TGLN continues to build on this momentum and is aiming to further accelerate growth in donations and transplants to prevent unnecessary deaths on the transplant waiting list and reduce wait times for transplantation.

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Additionally, TGLN's multi-year (2016-2019) strategic priorities: (i) **significantly increase consent for organ and tissue donation,** (ii) **significantly enhance and optimize physician leadership in donation,** (iii) **normalize OTDT as a shared value across all sectors of Ontario society (general public and within healthcare)** and (iv) **develop an integrated, sustainable tissue donation and transplant system in Ontario** will significantly shape TGLN's focus in 2016/17.

TGLN will continue its work to improve and move forward on recommendations put forth to the Ministry of Health and Long-Term Care (MOHLTC) where it relates to TGLN's information technology (IT) services and provincial tissue program.

Earlier in June 2015, at the Ministry's request, TGLN submitted a multi-year IT Renewal Plan to modernize TGLN's IT services and meet system requirements for the purposes of facilitating TGLN's 24/7 life-saving operations, achieving greater efficiencies and driving innovation and improvement in patient outcomes and system performance. The incremental budget request related to TGLN's multi-year IT Renewal Plan is captured in this Business Plan.

Also, as requested by the MOHLTC, TGLN submitted in summer 2014, a report titled *Tissue Banking in the Province of Ontario: Review and Analysis,* outlining recommendations for system improvement to the tissue donation and transplant system for the province of Ontario that maximizes tissue donation. This business plan captures the directions and recommendations that fall within scope of TGLN's current mandate for 2016/17. System related recommendations and those that require a change to TGLN's role and additional multi-year work identified in the Report are not included in this Business Plan and will be addressed through a separate submission.

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(2) Enabling Goal:

- **Drive quality, innovation, efficiency and cost-effectiveness through process improvement, information technology and talent management.**

To achieve these goals, 7 objectives have been identified and similar to the goals, objectives are grouped as either program or enabling objectives:

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- **Emphasize the value of organ and tissue donation and transplantation (OTDT) to all Ontarians through outreach and communications and inspire over 254,000 to register consent.**

(2) Enabling Objectives:

- **Enhance and sustain the quality management system that supports continuous quality improvement and meeting of quality standards.**
- **Enhance IM/IT to drive innovation, improvement and efficiency at TGLN and in the broader donation and transplantation system.**
- **Attract, engage, develop and retain talented staff.**

Goals, objectives and strategies are illustrated in the *Business Plan at a Glance* (see page 12).

Business Plan at a Glance

STRATEGIC PRIORITIES: 2016-2019			
Significantly increase consent for organ and tissue donation.	Significantly enhance and optimize physician leadership in donation.	Normalize OTDT as a shared value across all sectors of Ontario society (general public and within healthcare).	Develop an integrated, sustainable tissue donation and transplant system in Ontario.

GOALS	ANNUAL OBJECTIVES AND STRATEGIES			
SUPPORT TRANSPLANTATION THROUGH EFFECTIVE OVERSIGHT AND COLLABORATION WITH STAKEHOLDERS.	**Develop an integrated care model that will be informed using clinical and patient reported outcomes which includes reporting of 100% of patient outcomes by organ and site.**	Achieve 58-61% conversion rate for provincial hospitals , 271-290 organ donors and 3.57 organ yield per donor.	Achieve a 44% consent rate, 2200-2400 ocular donors and 330-350 multi-tissue donations.	Emphasize the value of OTDT to all Ontarians through outreach and communications and inspire over 254,000 to register consent.
	Develop a system performance measurement plan to evaluate, monitor and improve the quality of transplant services in Ontario.	Improve organ donation consent performance in order to maximize these opportunities across the province..	Increase the number of tissue referrals reported to TGLN.	Encourage culture change by enhancing grass roots advocacy, partnership and beneficial affiliations to extend TGLN's reach.
		Review staffing model to better align with donation case activity.		Optimize media relations and social media as a conduit for demonstrating the value of OTDT.
MAXIMIZE ORGAN AND TISSUE DONATION FOR TRANSPLANTATION IN PARTNERSHIP WITH STAKEHOLDERS.	In partnership with the Organ and Tissue Specific Working Groups, continue to develop and implement standardized best practices to improve patient care along the continuum.	Build on the success of the Donation Physician model to improve organ donation best practices.	Increase the consent rate for tissue donation in order to maximize these opportunities across the province.	Optimize cost-effective marketing opportunities to promote the value of OTDT.
		Collaborate with stakeholders to promote systemic improvements in organ donation.	Improve the capacity for ocular and multi-tissue recovery.	Partner and collaborate with ServiceOntario to improve registration opportunities and ensure registration processes are optimal.
BUILD A STRONG ORGAN AND TISSUE DONATION CULTURE IN ONTARIO.	Foster partnerships with patients and families to enhance the patient journey along the care continuum with the goal of improving patient knowledge and transplant outcomes.	Engage partners in working through system level barriers to maximize organ yield.	Increase the number of cases that are approached and recovered.	Enhance corporate communication to support fulfillment of TGLN's objectives and mandate.
			Continue advancement towards tissue system redesign.	
DRIVE QUALITY, INNOVATION, EFFICIENCY & COST-EFFECTIVENESS THROUGH PROCESS IMPROVEMENT, INFORMATION TECHNOLOGY AND TALENT MANAGEMENT.	Enhance and sustain the quality management system that supports continuous quality improvement and meeting of quality standards.	Enhance IT to drive innovation, improvements and efficiencies in TGLN and to/from key donation and transplantation partners.	Attract, engage, develop and retain talented staff.	
	Build the foundation that defines TGLN's clinical-donation system.	Build resilient IT infrastructure by securing technology assets and provide exceptional customer service.	Adopt an integrated talent management approach that places behavioural competencies at the heart of the model; using them as a common thread through all HR practices and programs.	
	Increase the audit function to identify gaps and strengthen processes.	Deliver business objectives with project management , oversight and governance.	Develop a multi-year HR Plan to support TGLN in enhancing and sustaining a healthy, high-performing and productive work environment.	
	Deliver process improvement in targeted areas that offer opportunities to achieve greater efficiencies.	Implement TGLN's core system modernization project.	Strengthen recruitment, selection, orientation and onboarding processes so that TGLN can source and recruit appropriate skills and capabilities to meet organizational needs and accelerate new hire time-to-productivity.	
	Expand the quality management system to improve system monitoring.	Empower decision makers with data and tools.	Review and revise the performance planning and develop practices and processes to incorporate a performance-based approach to compensation.	
			Develop and implement a robust recognition program that recognizes individual, team and organizational excellence.	

OBJECTIVE 1, RELATED STRATEGIES AND ACTION PLANS

Develop an integrated care model that will be informed using clinical and patient reported outcomes which includes reporting 100% of patient outcomes by organ and site.

Priorities for 2016/17 reflect TGLN's commitment to developing and sustaining an integrated transplantation system in Ontario. In the coming fiscal year TGLN will continue implementing transplant initiatives ensuring that the transplant system is transparent and accountable in its policies, programs and activities. Additionally, TGLN will build on its role in system planning while expanding its focus on evidence-based initiatives such as patient outreach development to enhance the quality of care of transplant patients as they transition through the patient continuum. TGLN will focus on system integration by continuing to develop formalized networks to enhance education and awareness across the system. A summary of the 2016/17 strategies to achieve higher quality care and patient outcomes is outlined below.

1.1 Develop a system performance measurement plan to evaluate, monitor and improve the quality of transplant services in Ontario.

TGLN has been working collaboratively with the Transplant Steering Committee, Provincial Organ Working Groups, and Information Services to continue to enhance a standardized performance measurement and monitoring plan for transplant programs and reporting of patient outcomes. In 2016/17, TGLN will continue to enhance reporting patient and program outcomes to transplant programs, MOHLTC, and other relevant stakeholders. This reporting will help clinicians better understand the patient's clinical pathway along the continuum and conduct an analysis of potential gaps at the local and provincial level to drive performance system improvement. TGLN will continue to evaluate the standardized allocation systems to allow for equitable access to all patients in Ontario. The following priorities are planned for 2016/17:

- Continued collaboration with Information Technology to enhance TOTAL to capture the required performance metrics to enable reporting
- Continued implementation of a standardized performance measurement and monitoring plan for transplant programs which allows bi-directional reporting of data including program and patient outcomes
- Utilize data to develop system level plans to drive quality improvement and inform system planning
- Ongoing evaluation of the organ specific algorithms to ensure equity access to care with the aim of decreasing time to transplantation and continuously improving transplant services in Ontario
- Continue to evaluate the sustainability of the organ recovery system and assess resources to support the increase in donor volumes
- Evaluate the use of Increase Risk Donors (IRDs) in Ontario to optimize organ utilization and increase access to transplantation
- Enhance the audit system to monitor validity and reliability of performance measures and patient information submitted by transplant hospitals

1.2 In partnership with Organ Specific Working Groups, continue to develop and implement standardized best practices to improve patient care along the continuum.

TGLN has been working with transplant experts from across Ontario through the Provincial Organ Working Groups to identify the needs of the transplant system and establish best practices along the patient continuum. These best practices are evidence-based care management plans to reduce the variation in clinical practice and improve patient outcomes along the care continuum. In addition, TGLN will work the transplant community to enhance kidney transplantation by development of a system outreach model for post transplantation care that will strive to improve patient outcomes. The following priorities are planned for 2016/17:

- In collaboration with transplant centers develop an implementation plan for each clinical pathway and identify resource requirements to adopt each bundle along the patient care continuum

- Complete the development of a system outreach model for kidney transplant patients that supports care closer to home
- Submit a business case to the MOHLTC to support the resource requirements to implement the system outreach model; begin the planning cycle for system outreach model for remaining organ groups
- Work with system partners to develop performance reporting for cornea transplantation to drive continuous system improvement
- Continue to implement the tissue system redesign

1.3 Foster partnerships with patients and families to enhance the patient journey along the care continuum with the goal of improving patient knowledge and transplant outcomes.

TGLN will work towards providing patient education, information and transparency at the provincial level so that patients are able to make informed decisions about their treatment options. This will be accomplished by continued collaboration with partner organizations (e.g. Ontario Renal Network and Cardiac Care Network) to identify the educational needs and support for transplant patients and their families. TGLN will also strive to improve web-based education tools through the TGLN website including transplant information videos for patients and families as well as public access to transplant wait listing and allocation policy documents. The following priorities are planned for 2016/17:

- Implement a patient engagement strategy to ensure patients and families are partners in planning for transplant services in Ontario
- Enhance the TGLN website to capture and provide transplant information to healthcare providers and patients
- In collaboration with key renal partners, patients and families design an evidence based transplant education program to support early and ongoing education of patients and their families on transplant care options along the continuum
- Develop the business case for the MOHLTC identifying the required resources to support implementation of this program

OBJECTIVE 2, RELATED STRATEGIES AND ACTION PLANS

Achieve a 58-61% provincial conversion rate, 271-290 organ donors and a 3.57 organ yield per donor.

The organ donation targets reflect the overarching mission to save and enhance more lives in Ontario. With family consent key to realizing Ontario's donation potential, TGLN will continue to focus on improving consent performance through encouraging a culture in which donation is normal and expected (as in the "Spanish Model"); heightened evaluation and training; and the expansion of the Family Coordinator role which is focused on approaching families for consent. With TGLN's Organ and Tissue Donation Coordinators (OTDC) tending to more and more cases, TGLN will review the current staffing model to promote efficiencies, balance workload and ensure continued support to cases. Additionally, continued focus on the engagement and training of the donation physicians will further contribute to the performance of hospitals and support building the culture of donation in Ontario inside the healthcare system. Committed to maximizing all donation opportunities, TGLN will pursue marginal organ donors and work with transplant partners to improve organ yield. Finally, in a rapidly evolving environment, TGLN will work with its stakeholders to foster innovative and systemic improvements. A summary of the strategies to achieve the identified targets is outlined below.

2.1. Improve organ donation consent performance.

TGLN utilizes well established leading practices in the training of staff that approach families for consent. While these practices have served TGLN well, TGLN will continue to enhance its understanding of

opportunities to enhance consent practices. Some of the activities being considered to improve consent performance are highlighted below.

- Preliminary data suggests that referrals made 12 hours in advance of withdrawal of life sustaining therapy (WLS) or neurologic determination of death (NDD) declarations are the most successful for approaching families, obtaining consent, and realizing donation potential. TGLN will develop reports to share information with hospitals related to the timing of referrals in relation to WLS and NDD declarations. With the intention of reducing the number of missed organ donation opportunities, these reports will also highlight referrals reported after WLS has already taken place. For cases referred when WLS is imminent (within the hour, for example), TGLN will create and deploy scripting to ask families for additional time to assess organ donation potential.

- To ensure every eligible patient and their family is approached with the opportunity to donate in a planned and deliberate manner, TGLN initiated the Mandatory Approach Strategy in 2015/16. TGLN will continue to operationalize the tactics identified in this strategy in order to close the gap in the number of eligible patients and their families not provided with the opportunity to donate organs at end of life. Accordingly, more than 1,100 approaches are anticipated in 2016/17; this is an additional 200 approaches than were completed in 2014/15.

- Based on the anticipated success of the Family Coordinator role being implemented in 2015/16, TGLN will expand this role to offer coverage ten hours a day, seven days a week, in order to support the expected increase in families approached. The Family Coordinator is a position dedicated to approaching families with compassion, empathy, and knowledge.

Additionally, TGLN will continue to monitor the key factors that influence consent outcomes in order to tailor training activities toward improving situations identified as having the lowest consent outcomes. Moreover, where possible TGLN will seek to dispatch coordinators to specific approach situations, as determined by their skill set and location.

To facilitate continuous performance improvement, TGLN will enable Family Coordinators and Organ and Tissue Donation Coordinators (OTDCs) to run real time reports that illustrate their individual consent performance in comparison to provincial averages by role, approach type, and registered consent decision status. The ability to consistently monitor and measure individual consent rates will promote understanding, knowledge, and reflection.

More in depth analysis will be initiated to determine the impact of a preliminary mention of donation by hospital staff, the use of interpreters when working with families, and approaches to families carried out over the telephone. Strategies to address opportunities for improvement will be identified and implemented accordingly.

Finally, TGLN will continue to work with bioethicists and health care professionals as the use of more assertive language is deployed with families where a patient's registered consent decision is not upheld by their family. Bioethicists are helping TGLN with language for families that will enforce that the patient has already made their decision to donate, and their role as the substitute decision maker is to ensure the patient's registered consent decision is honoured.

With the knowledge that registration significantly improves the likelihood of family consent, TGLN will continue to encourage Ontarians to register their donation decision so that next of kin can be made aware of a potential donor's wishes.

2.2. Review staffing model to better align with donation case activity.

With the understanding that a healthy work life balance is fundamental to staff satisfaction and retention, TGLN will continue to review opportunities to better align staffing (including mix of full-time, part-time and casual staff), hours of work and hours on on-call with donation case activity.

In order to increase timely on-site response times and reduce the distance travelled by OTDCs across the Greater Toronto Area to support donation case activity in hospitals, TGLN will explore the development of regional response teams in this area. In addition, to further ensure donation opportunities are not missed due to a delay in on-site response, TGLN will further leverage the skills and expertise of Referral Triage Coordinators working in the Provincial Resource Centre to approach families during times of high volume and surge situations.

To better understand the time spent by OTDCs in the field, TGLN will revise the current workload assessment tool for this group, ensuring staff spend the majority of their time on clinical activity and providing education. Accordingly, the development of education and training materials will be transitioned to the Education Centre. Similarly, shifting the responsibilities associated with the deceased health record review away from the OTDCs will be initiated. Given the increase in volumes, the OTDCs have limited time to dedicate to this important task. As such, TGLN will expand the use of Chart Reviewers. With 56 hospital corporations participating in Public Reporting, chart reviewers are the most cost effective and efficient way to ensure the deceased health record review is completed in a timely manner.

2.3. Build on the success of the Donation Physician model to improve organ donation best practices.

In 2015/16 TGLN launched an online portal to provide a secure, universal method of knowledge transfer and access to resources for physicians who have accepted the role of Hospital Donation Physician. This dedicated collection of information and tools, also includes an interactive discussion forum for idea exchange between physicians. With the intent of assisting physicians and maximizing their potential to be successful in improving donation in Ontario, TGLN will leverage this portal and other methods to implement ongoing quarterly education for the HDPs.

Further, to foster relationships and build on the success of face to face sessions between the Regional Medical Leads and Hospital Donation Physicians, TGLN will support the travel and logistics of hosting regional physician education events.

TGLN will also build on the 2015/16 initiative to develop a cohesive and comprehensive core curriculum for physicians and critical care residents throughout the province. This would include donation best practices, simulation, and crucial conversations training for end-of-life. Identification of preferred delivery models will be determined through a needs assessment that is to be conducted. TGLN will then engage subject matter experts in communication technology to create a plan for knowledge transfer capabilities. This work will be done in consultation with Canadian Blood Services (CBS), to ensure utilization at the national level.

To establish interest and knowledge about donation early in a physician's career, TGLN will expand the "Resident in Donation" program beyond its current participating centre, McMaster University. TGLN will reach out to academic centres in Toronto, Ottawa, London, and Kingston to introduce this important educational program.

Through the existing partnership with the Institute for Clinical Evaluative Science, in 2015/16 there was agreement to work together to develop a methodology for evaluating the impact of the donation physician model in Ontario. TGLN will continue to advance this work with the view to making ongoing improvements to the model, ensuring that physicians are engaged and that they have necessary knowledge, tools and time to support this very important work.

Affording physicians with a forum to promote new initiatives, highlight priorities, and provide expert advice on strategies to maximize organ and tissue donation across the province, TGLN will consider initiating a Medical Advisory Committee. Preliminary discussions have identified the committee's focus may include: identifying trends and emerging issues in hospitals that may have an impact on the effective delivery of organ and tissue donation services and providing advice to address these issues; providing insight into the readiness of Ontario hospitals to support new organ and tissue donation initiatives; and identifying areas of research in support of building knowledge and expertise in donation.

2.4. Collaborate with stakeholders to promote systemic improvements in organ donation.

TGLN will continue its work to assess the opportunities to strengthen the *Trillium Gift of Life Network Act* (the Act) through proposed changes that would make the Act more consistent with the current practices in donation and public expectations. TGLN will work with stakeholders and the public to determine the interest in and potential impact of amendments to the Act.

Because research is pivotal in driving best practice, increasing donor numbers, and optimizing organ yield, TGLN will continue to support the numerous innovative research initiatives, both internally and with external stakeholders. More specifically, TGLN seeks to partner with the Canadian National Transplant Research Program or a similar agency to explore an understanding of family decisions and how best to support them during the donation process.

As part of a long term strategy, TGLN, in conjunction with hospital stakeholders, will continue to explore methods of exchanging real time data between provincial Information Technology systems and TGLN's donor management system, iTransplant. This will facilitate the potential for automated electronic patient referrals, in particular when a patient meets the clinical triggers in the Emergency Departments and Intensive Care Units.

2.5. Engage partners in working through system level barriers to maximize organ yield.

Given the rarity of organ donation, TGLN is committed to pursuing all organ donation opportunities. To ensure all suitable donors are assessed appropriately, TGLN will review its practices to ensure that the criteria used to rule a donor medically unsuitable is being used consistently. Methodology will be developed to identify and review these cases periodically to ensure all Referral Triage Coordinators and Clinical Services Coordinators have similar practices when consulting the transplant programs or Transplant Support Physicians prior to closing medically unsuitable cases.

As TGLN's transplant stakeholders continue to strive for innovative ways to improve organ donation, TGLN will work to support endeavours that facilitates improvement to donation, including organ yield. One such study that is expected to launch in 2015/16 is the proposed study of Non-Perfused Organ Donation (NPOD) at University Health Network (UHN). The proposed study will assess the feasibility of using lungs from non-perfused organ donors after unsuccessful resuscitation in a controlled environment. Similar to tissue donation, when an unanticipated death occurs and the patient is declared deceased, the patient would be referred to TGLN and go through an initial NPOD pre-screening. If suitable, a TGLN coordinator will approach the family regarding the potential for organ donation. After recovery, the lungs will be placed on the ex-vivo lung perfusion machine for a minimum of 4-6 hours for evaluation, prior to making the decision of suitability for transplant. This study, should it move ahead, will continue to be supported and monitored for applicability for more wide spread practice in future.

In 2015/16 TGLN supported UHN's Liver Transplant Program with implementing the use of the OrganOx, an external liver perfusion machine similar to the ex-vivo lung machine. TGLN will continue to support use of ex-vivo machines in order to promote marginal organs being recovered, treated, and reassessed prior to transplantation. Given the complexities and additional equipment required for ex-vivo cases, TGLN will expand its complement of Surgical Recovery Coordinators. This role is essential to support multi-organ recoveries as well as the current and expected increase in clinical activity. To address the rise in recovery volumes, TGLN will expand its medical supplies, as well as courier and transportation support.

Partnerships with the Alberta Health Services program in Edmonton and Donate Life in Australia will be formed to conduct research related to the use of an ex-vivo machine for heart recoveries. Australia's progressive steps to transplant six hearts from DCD donors is monumental. As such, TGLN will continue to promote these important initiatives.

In order to maximize the number of viable organs transplanted, TGLN will continue its current practice of reviewing data with the transplant programs. Sharing metrics such as the number of organ declines, in

addition to the outcomes of marginal organ donors promotes better acceptance of organs from extended criteria donors, thereby promoting improved organ yield.

OBJECTIVE 3, RELATED STRATEGIES AND ACTION PLANS

Achieve a 44% consent rate, 2,200-2,400 ocular donors and 330-350 multi-tissue donations.

TGLN's targets reflect a planned increase in the number of referrals through improved hospital compliance with Routine Notification and expansion of the referral and screening program with the Office of the Chief Coroner. New initiatives will be implemented to increase the number of families approached for donation, ensuring that the option of tissue donation is provided to families, and ultimately increase consent performance. Additionally, advanced ocular recovery methods and continued collaboration with tissue bank partners will contribute to an increase in the number of ocular and multi tissue recoveries. A summary of the strategies to achieve the identified targets is outlined below.

3.1. Increase the number of tissue referrals reported to TGLN.

The provincial rate for Routine Notification has consistently hovered around 93-94%, resulting in nearly 2,000 missed referrals every year. As such, TGLN will work with its hospital stakeholders to improve Routine Notification compliance moving closer to the provincial target of 100%. In addition, education will emphasize referrals that are initially ruled out for organ donation, may have potential for tissue donation and must be actioned, by way of a call back from the hospital.

In 2015/16 TGLN will be proposing amendments to Ontario Regulation 179/05 under the Act in order to expand Routine Notification and Reporting requirements to additional hospitals. If these proposed amendments are approved by the Minister of Health, TGLN will expand the Routine Notification reporting requirements to the remaining Level II hospitals in Ontario in order to generate additional tissue referrals.

In 2015/16 TGLN, in partnership with the Ontario Office of the Chief Coroner and Ontario Forensic Pathology Services initiated a program to identify potential tissue donors who die outside of the hospital in Toronto. In 2016/17, this referral and screening program will be expanded to the Greater Toronto Area in order to increase the number of tissue referrals and donors.

3.2. Increase the consent rate for tissue donation in order to maximize these opportunities across the province.

Reports will be developed to distinguish consent rates by tissue type to create an understanding of how consent rates differ for ocular tissue compared to multi tissue (bone and connective tissue, skin, and heart valves). Additionally, isolating the consent rate for tissue donation among organ donors will be investigated to better understand barriers to families.

Similar to the team huddles that occur prior to approaching families for organ donation, TGLN will explore implementing pre-approach huddles for tissue donation. These huddles ensure coordinators have a clear understanding of family dynamics, allow them to review best practices with hospital staff, and establish a plan to approach the family in a timely manner.

Consistent with the initiative to dispatch OTDCs to specific approach situations for organ donation cases, TGLN will also evaluate assigning Tissue Coordinators to specific family approaches based on the circumstances, and a coordinator's identified skill set.

Currently, a re-approach strategy is in place in several hospitals across the province. Should a health care professional inform TGLN that a family has declined donation, coordinators re-approach families to ensure they were provided all of the information necessary to make an informed decision about tissue donation. Analysis of this strategy will determine whether to expand the initiative to all hospitals across the province.

With the knowledge that registration significantly improves the likelihood of family consent, TGLN will continue to encourage Ontarians to register their donation decision so that next of kin can be made aware of a potential donor's wishes.

3.3. Improve the capacity for ocular and multi-tissue recovery.

TGLN will explore opportunities to improve capacity for ocular and multi-tissue recovery. One such method includes corneal excision. Corneal excision (in-situ) recovery allows the cornea to be placed in preservation media much earlier, extending tissue viability. This specialized recovery technique also improves tissue quality and the corresponding surgical outcomes. In-situ recovery was implemented in 2015/16 and will be expanded throughout the Greater Toronto Area to improve TGLN's capacity for ocular recovery and increase ocular donations.

TGLN will separate the functions of the Tissue Coordinator role into two distinct roles. At this time, the Tissue Coordinator has two key roles: (1) to speak with families for consent to donation, and (2) to recover ocular tissue. This will allow the staff to focus on one key role, both of which are time sensitive, and will ensure that the approaches to families are not interfering with timely recovery of tissue.

Finally, concerns have been expressed by the tissue banks that the time and cost of travel to multi-tissue recoveries in geographically distant areas is prohibitive. Consequently, TGLN will work with the tissue banks to re-evaluate the service area for multi-tissue recoveries in order to maximize potential donation while maintaining cost effective recoveries.

3.4. Increase the number of cases that are approached and recovered.

Historically, TGLN has not approached families regarding tissue donation overnight. In order to reduce the number of families not offered the opportunity to donate, TGLN has piloted a strategy to approach families overnight in cases where a registered consent decision is present. Analysis of the success of this pilot will determine if this initiative should be expanded to include families where there is no consent decision on record.

Patients referred and ruled out for organ donation may often be suitable for tissue donation. Accordingly, TGLN will monitor and work to ensure these families are approached for tissue donation by OTDCs when possible, in order to ensure connection with the family when at the hospital.

TGLN's partnership with the provincial tissue banks is essential to tissue donation success in Ontario. Accordingly, TGLN will develop requirements of the tissue banks to secure consistent communication, maintenance of recovery capacity, data sharing, and collaboration to reduce the number of cases not recovered when consent is obtained. Development of robust reporting and analysis mechanisms will contribute to effective feedback related to tissue bank performance, and their aptitude to convert referrals to donors.

3.5. Continue advancement toward tissue system redesign.

In support of the results of the external review '*Tissue Banking in the Province of Ontario*' completed in 2014, TGLN established two working groups in 2015/16 to work together towards the implementation of the identified recommendations; this work will continue in 2016/17. A separate budget submission will be presented to the MOHLTC to address the specific requests of the redesign strategy.

OBJECTIVE 4, RELATED STRATEGIES AND ACTION PLANS

Emphasize the value of OTDT to all Ontarians through outreach and communications (as per the "Spanish Model") and inspire over 254,000 to register consent.

Communications, outreach and social marketing are key to developing the "culture of donation" that has helped Spain achieve its successes in donation. With the ultimate goal of increasing consent for donation to save more lives, TGLN's comprehensive communications plan seeks to normalize donation via awareness, education and inspiration, as per the "Spanish Model". In Ontario, registration is a key driver of family consent and is a useful barometer of culture change. TGLN has outlined its strategies and high level activities to achieve these objectives in the *Integrated Marketing Communication Strategy* (see page 30).

OBJECTIVE 5, RELATED STRATEGIES AND ACTION PLANS

Enhance and sustain the Quality Management System that supports continuous quality improvement and meeting of quality standards.

To sustain its focus on continual quality improvement, TGLN continues to invest in its quality system. It understands that further development and refinement of its quality system is an on-going journey. Additionally, TGLN recognizes that quality systems need to be implemented across the entire organization in order to achieve the benefits and efficiencies that are possible for improved program delivery. TGLN's quality management system is comprised of two main components: compliance to quality standards, and continuous improvement. The strategies and action plans for 2016/17 delineate the on-going building of the quality foundation and the improvement of targeted TGLN processes. TGLN will maintain its compliance to Health Canada's *Safety of Human Cells, Tissues and Organs for Transplantation Regulations* while seeking ways to drive on-going improvement and efficiencies in its service and program delivery.

Strategies and high level actions for 2016/17 are highlighted below.

5.1 Build the foundation that defines TGLN's clinical-donation system.

TGLN will continue the development and enhancement of process documentation to meet clinical and quality system framework needs. In 2016, Health Canada will inspect TGLN on its deceased organ and composite tissue mandates. The Hospital for Sick Children will also be conducting an audit of heart valves in the same period. These anticipated inspections and audits will focus on TGLN's documentation of its clinical-donation system. Also in 2016/17, the quality department will continue its focus on the development of clinical process instructions for tissue, so that TGLN can work towards compliance to the American Association for Tissue Banks (AATB) standard.

5.2 Increase the audit function to identify gaps and strengthen processes.

Annually, the quality department conducts an organization-wide internal audit of its donation processes, as well as external audits at each of its organ recovery groups and laboratories. In 2015/16, the quality department will initiate the audit of wait-listed patients by transplant programs to identify and resolve any gaps. Subsequently, in 2016/17, the quality department will expand the audit process at transplant programs to review the charts of transplanted patients, so that any performance metric-related gaps can be identified and resolved. Additionally, in 2016/17, audits will also be conducted of the OTDC function, to identify potential process gaps which will need to be resolved to further strengthen donation process.

5.3 Deliver process improvement in targeted areas that offer opportunity to achieve greater efficiencies.

In the current environment of needing to do greater work with the same or fewer resources, TGLN continues to support opportunities to deliver programs more efficiently and effectively. In 2016/17, opportunity areas for quality improvement include focus on tissue process streamlining and data quality enhancement.

5.4 Expand the quality management system to improve system monitoring.

To assist in the management of specific quality records, an automated quality management system (QMS) was initiated in 2014/15. The first QMS module to be developed was an automated document management

system. The plan for 2016/17 is to expand the QMS development with the addition of three modules to handle internal audits, corrective actions and system non-conformances. The addition of these system modules represents the second building block in the automation of the quality management system.

OBJECTIVE 6, RELATED STRATEGIES AND ACTION PLANS

Enhance IT to drive innovation, improvement and efficiency at TGLN and in the broader donation and transplantation system.

In 2014/15, TGLN undertook a review of its Information Technology (IT) footprint. It was clear from this review that the business areas' need for evidence informed decision making data and faster turnaround times for system changes had far outstripped the current IT capabilities (technology, people and processes). Today, there are antiquated systems, unsupported vulnerable technologies, and patchwork infrastructure that are contributing to impeding progress. Additionally, based on client interviews that were recently conducted, the following key areas of improvement have been identified:

- Service culture
- Quality assurance
- Queue/workload management
- Technical skills
- Modernization of systems and processes
- Security & privacy
- Accountability/teamwork

Based on the above reviews, TGLN has taken the initial step to create and recruit an IT management team that will lead and contribute to the conditions of success. The vision for IT, as it relates to fulfilling TGLN's mandate to plan, promote, coordinate and support organ and tissue donation and transplantation across Ontario is to be more responsive to customer needs; become more nimble to needs of allocation; acquire the right resources with technical competency and offer superior customer service skills; implement fundamental system renewal; provide timely and accurate data; promote partnership with business areas; implement industry standard processes (Information Technology Infrastructure Library(ITIL), Project Management Body of Knowledge (PMBOK), Business Analysis Body of Knowledge (BABOK) and in the end craft solutions that TGLN and its partners can be proud of. To capture this progress, a measurement framework will need to be implemented that captures where we are today on the path forward with an end goal of serving our customer base who in turn save and enhance lives.

As significant focus and resources are required to update TGLN's IT system to meet its internal needs and those of its key stakeholders, TGLN has identified the following key strategies to achieve the IT objective for 2016/17:

6.1 Build resilient IT infrastructure by securing technology assets and provide exceptional customer service.

The IT infrastructure at TGLN facilitates all activities within TGLN: providing key tools to the 24/7 Provincial Resource Centre, provisioning of modern communication technology; secure document sharing with other Organ Procurement Organizations (OPO) / tissue banks for the purposes of efficient allocation of tissue and organs. IT infrastructure is essential to the operations of TGLN. To ensure that the infrastructure is capable of meeting TGLN's needs today and for the foreseeable future, TGLN is taking a multi-pronged approach to ensure resiliency:

(1) TGLN will ensure that only supported hardware and software are used at TGLN. Software and hardware that are not supported by the respective vendors will be phased out using an ever-greening plan, where every asset is given a shelf life and a plan is in place to upgrade;

(2) TGLN will "lock down" all of its assets such that information security is of the highest priority. Everything from usage of remote work technology to access to the network to USB keys will be tightly managed; and
(3) There will be an emphasis on building a service culture to ensure that these assets are utilized efficiently by customers.

6.2 Deliver business objectives with project management, oversight and governance.

IT project management and governance is *ad hoc* and does not always include the relevant parties of interest, which may lead to sub-optimal outcomes and inefficiency. To optimize the current management of organization-wide projects and initiatives within TGLN's virtual project management office (PMO) framework, IT will establish and implement a project management methodology. This methodology will effectively and efficiently engage TGLN's Senior Leadership and management team. This methodology will ensure collaboration and decision making to determine the timelines, scope and implementation strategies to be leveraged when delivering technology solutions in alignment with corporate initiatives. Specific actions include:

- Establish IT project management level oversight and governance to align with TGLN enterprise-wide priorities, projects and initiatives
- Create processes and acquire tools to facilitate communication and provide better oversight
- Recruit staff with project management and business analysis skills to ensure that quality, scope and time objectives are achieved.
- Create and implement dashboards
- Establish portfolio based governance model

6.3 Implement TGLN's core system modernization project.

The IT infrastructure supports applications that facilitate decision making and critical functions of organ allocation. At present, TGLN's transplant and allocation information system, TOTAL, is operating on an out-of-date and unsupported version of software. The primary objective of the migration is to bring TOTAL into a supported software platform. A critical failure in this software application presents high risk in continuing to support TGLN's 24/7 donation and transplantation system operations through TOTAL. The key benefits of migrating TOTAL to a modern operating platform are two-fold: effective risk mitigation to contain impacts to critical system failures; and efficiency savings through implementation of modern software platform there by expediting future enhancements to TOTAL; reducing backlog of projects and overall project schedules; resource time spent on projects; and overall cost per project. New business initiatives that drive changes or enhancements to TOTAL are constrained by dated software functionality.

TGLN will begin a multi-year renewal project, based on an approved business case, to move TOTAL into a modern development platform. The new system will facilitate architecture upgrades ensuring all TGLN supported systems are cradled in a single, supported and robust architecture. This will also help establish intuitive user interface, and streamlined data capture and reporting, IT will reduce overall support provisions to maintain an outdated and resource-intensive application platform. Based on an approved business case, TGLN will proceed with a Request for Proposal (RFP) for a vendor to provide a "turnkey" solution. TGLN will work with the vendor to:

- Ensure that there are phases in the project to ensure quality and reduce unknowns
- Ensure visible deliverables are made available to the stakeholders early
- Ensure that that there are off-ramps if the vendor is not determined to be suitable
- Ensure strong governance and project timeline adherence are followed to achieve optimal results

In the interim, in order to reduce the risk, TGLN will work closely to ensure that the current system can be maintained for the next few years while the new system is being built and made production ready.

6.4 Empower decision makers with data and tools.

TGLN will build the capability to empower internal and external data consumers with access to their anonymized data. Using advanced toolsets, consumers will be able to visualize and manipulate datasets to speed up their processes and customize the output to their needs. Specifically, TGLN will acquire skillsets to build and deploy the platform; acquire and deploy the toolsets and provide rudimentary training to data consumers to make use of the data that is available to them.

OBJECTIVE 7, RELATED STRATEGIES AND ACTION PLANS

Attract, engage, develop and retain talented staff.

TGLN staff are integral to achieving increases and improving OTDT results. Given its niche role in the health care sector, TGLN relies heavily on the deep expertise of its professional staff. Attracting the right people to fill staff roles, retaining our talented staff and enabling staff to excel in their roles are key drivers of TGLN's human resource plans.

In 2016/17, TGLN will continue its focus on attracting, engaging, developing and retaining talented staff through multi-faceted strategies as identified below.

7.1 Adopt an integrated talent management approach that places behavioural competencies at the heart of the model, using them as the common thread throughout all human resources practices and programs.

TGLN will adopt and customize as needed a behavioural competency model that will be used to integrate people, practices and programs that attract, engage, develop and retain our human resources. Access to already developed leadership and competency models through organizations such as the Ontario Hospital Association and/or the Leadership and Organizational Development Consortium, can both minimize development time and cost as well as provide access to many HR tools and resources (e.g. assessment, interviewing and selection, talent management, etc.)

7.2 Develop a multi-year Human Resources Plan to support TGLN in enhancing and sustaining a healthy, high-performing and productive work environment.

A healthy workplace model will be developed that incorporates organizational, safety, and personal excellence. To inform the development of the HR Plan, an employee engagement survey will be considered. Action plans to respond to findings of the survey may necessitate the review and reprioritization of HR strategies that may be identified within the Business Plan.

HR and occupational health and safety (OHS) policies, processes and practices to better meet organization and/or legislative requirements will continue to be updated, adopting leading practices as appropriate. HR related process will be automated where possible to provide improved information, data collection and service.

7.3 Strengthen recruitment, selection, orientation and onboarding processes so that TGLN can source and recruit the appropriate skills and capabilities to meet organizational needs and accelerate new hire time-to-productivity.

TGLN will use the findings and approved recommendations of the Recruitment and Selection Advisory Group to continue to work on action plans to improve processes that will strengthen recruitment, selection, orientation and onboarding. Action plans will include: building in the adopted competency models into the interviewing and selection processes; training leaders (and others as appropriate) in conducting behaviour-based interviews; developing and implementing a corporate orientation and onboarding program and guiding the efforts at the departmental level; identifying, monitoring and reporting progress towards achieving improved recruitment and retention targets.

7.4 Review and revise the performance planning and development practices and processes to incorporate a performance-based approach to compensation.

The performance planning and development process will be restructured and implemented to adopt a number of leading practices, such as: utilizing cascading goals/objectives throughout the organization to *ensure that individual and team goals are aligned with departmental and organizational goals; using revised* criteria and performance rating scales to determine eligibility for performance-related aspects of the compensation program; incorporating the assessment of behavioural competencies into the performance planning and development practices and processes; identifying and responding to the communication, training and development needs of staff and leaders in adopting this approach (e.g. developing SMART objectives, giving and receiving feedback, monitoring progress, etc.) with a view of improving the quality, consistency and timeliness of reviews; and, continuing to automate and develop new features within TGLN's performance management system, Success Factors, to support the process.

7.5 Develop and implement a robust recognition program that recognizes individual, team and organizational excellence.

Work was undertaken during 2014/15 to review and revise TGLN's position relative to the marketplace with respect to compensation. TGLN will continue to sustain its position relative to market competitiveness by determining and providing appropriate salary adjustments for 2016/17.

To recognize team and individual excellence, TGLN will also incorporate leadership and staff competency models into a multi-level recognition program to celebrate excellence at the individual, team and organization levels.

Risk Assessment & Management

TGLN conducts a risk assessment to identify potential risks that may impact its ability to realize its objectives, strategies and high-level activities for the coming fiscal year. The 2016/17 risk assessment is submitted in accordance with the Agencies and Appointment Directive. Risks are identified and assessed in accordance with the Ontario Public Service (OPS) risk categories, as delineated below:

Broad Risk Category	Detailed Risk Category	Definition
Strategic	Strategic/Policy/Performance Risk	Risks related to implementing new policies or changes to existing policies. The risk that strategies and policies fail to achieve required/targeted results. The risk of not providing value for money or cost-effectiveness.
	Political Commitment Risk/Stakeholder and Public Perception Risk	The risk of not meeting publicly announced commitments made to meet/further the government's objectives. This could include platform and mandate letter commitments.
Accountability/ Compliance	Governance/Accountability/Organizational Risk	The risk that organization's structure, accountabilities, or responsibilities are not defined, designed, communicated or implemented to meet the organization's objectives and/or that culture and management commitments do not support the formal structure.
	Legal/Contractual Compliance Risk	Risks related to potential cost of complying with a legal or contractual agreement, or of litigation against government. The risk that a government initiative or action will contravene a statue, regulation, contract, MOU or policy.
	Controllership/Accounting Risk	Risks related to the reliability of reporting or a change in accounting.
Operational	Program Caseload/Utilization Risk	The risk of a change in demand for services or entitlements or increased claims/caseload that cannot be deferred. This assumes no policy or legislative changes.
	Service/Operational Risk	The risk that products or services will not get completed or delivered to quality standards or in a timely manner as expected, for reasons not related to caseload. This includes business continuity risk.
Workforce	Ontario Public Service Workforce Compensation Pensions Risk	Risks related to OPS binding wage settlements, existing contracts or minimum negotiation mandate.
	OPS Workforce/Skill Shortage Risk	Risks related to skill shortage; specialized staff skills not available
	Broader Public Sector (BPS) Compensation	Risks related to binding BPS wage settlements, BPS anticipated negotiations
	Broader Workforce Risk	Risks related to not having staff available to complete tasks

Broad Risk Category	Detailed Risk Category	Definition
I.T. and Infrastructure	Information & Information Technology Risk	The risk that information produced or used (e.g. performance data) is incomplete, out-of-date, inaccurate, irrelevant or inappropriate to disclose. The risk that information or other technology does not support business requirements, and/or does not support availability, access, integrity, relevance and security of data. This includes business continuity risk.
	Capital Project Delays	Risks relating to changes in construction costs and/or project delays. Risk related to new projects.
Other	Other Risks	Risks that do not fit in any of the above categories.

Human Resources

TGLN has identified an objective and corresponding strategies related to Human Resources (See Objective 7). Additionally, an organizational chart and staff numbers have been included to describe how TGLN is structured and where additional staff is required to achieve the objectives identified for the coming fiscal year. (See pages 37 and 38).

Information Technology/Electronic Delivery

As highlighted in this Business Plan (See Objective 6), IT services are critically important to successful achievement of TGLN's goals and objectives, and is an integral component of TGLN's 24/7 lifesaving operations and a key lever to drive innovation, improvement in patient outcomes and system performance and achieve efficiencies.

Initiatives Involving Third Parties

Collaboration and partnership between TGLN and stakeholders within the organ and tissue donation and transplantation community and the Ontario government is essential to successfully achieve TGLN's objectives. TGLN has identified the following third parties where partnership is integral to implementing the strategies and actions set out in the 2016/17 Business Plan.

1. Steering Committees – TGLN has various committees in place, including: Donation Steering Committee, Transplant Steering Committee and Organ Specific Working Groups. Membership of these committees includes representation from donation hospitals (physicians, nursing and administration), transplant programs, etc. These committees are important influencers of TGLN's work and ensure strong relations between TGLN and its key stakeholders.

2. Transplant Programs – TGLN continues its work to develop a comprehensive provincial transplant system. TGLN will work closely with provincial transplant programs to ensure that their needs are met through the TGLN's initiatives.

3. Hospital Donation Physicians – TGLN is engaging all 56 Ontario hospitals with Level III critical care services to launch the implementation of the Hospital Donation Physician (HDP) role. Working with the hospital's Executive Lead and Operational Lead, the HDP is responsible for ensuring an effective donation program is established and integrated into quality end-of-life care within the hospital. This involves alignment of best practices across the organization and ensuring all physicians are aware of the hospital's requirements under the *Trillium Gift of Life Network Act*. Along with the Regional Medical Leads, these physicians promote a culture of organ and tissue donation in hospitals and across the province. Their roles serve as a clinical resource, educator, and advocate to improve all aspects of donation, from identification and referral, to consent, medical management, declaration of death, and recovery.

4. Canadian Blood Services – As outlined in the *Environmental Scan* (See page 9) and in support of key initiatives, TGLN will work with CBS on organ and tissue donation and transplantation issues that are national in scope. TGLN will continue to work collaboratively with CBS and other provincial Organ Donation Organizations in support of the Canadian Transplant Registry.

5. ServiceOntario – ServiceOntario is a key partner for TGLN to increase organ and tissue donor registrations. A significant portion of the donor registration process is outside of TGLN's direct control and is managed by ServiceOntario. TGLN works collaboratively with ServiceOntario and the Ministry of Health and Long-Term Care to optimize donor registration opportunities and maximize uptake of donor registration through all three registration channels: in-person, online and mail.

6. Other Key Partners – In addition to the aforementioned, as identified in the Business Plan, other stakeholders that are integral to TGLN's initiatives include: Critical Care Society (CCS), Critical Care Services Ontario (CCSO) and the Ontario Medical Association (OMA) among other stakeholders and organizations.

Communications Plan

Integrated Marketing Communications Strategy 2016/17

OBJECTIVE

Business: Strategic Focus and Priority

Informed by the "Spanish Model", TGLN's communications efforts in 2016/17 will continue to build a "culture of donation" in Ontario with the ultimate goal of increasing consent for donation and saving more lives. Taking lessons from Spain, TGLN will use a mix of communications to normalize organ and tissue donation via awareness, education, and inspiration. As registration is a key contributor to increased consent rates, and is a useful barometer for culture change, TGLN will seek to drive an additional 254,000 Ontarians to register.

With TGLN's broadened focus and registration target, strengthening relationships with media and effectively engaging and communicating with stakeholders is critical. As such, TGLN will emphasize media relations and stakeholder engagement to build a culture of donation in Ontario, including a tangible call to action for the public to register, that will lead to increased "conversion" and yield more donors.

CONTEXT

General Background

- Almost 1,600 people in Ontario are waiting for an organ transplant.
- Registration contributes to saving lives by positively influencing consent rates. A significant barrier to conversion of potential organ donors is lack of family consent to organ donation. Donor registration is a key influencer to obtain family consent for organ and tissue donation and increase conversion rate.
- More families and/or next-of-kin consent to organ donation with evidence of their loved one's registered consent. Without this evidence, consent drops dramatically.
- At April 30, 2015, 3.2 million or 27% of eligible Ontarians were registered organ and tissue donors.

Key Research Findings

- Key research findings (from 2013) include the following:
  - Organ and tissue donation is not top of mind and is not a personally relevant or pressing issue for most Ontarians.
  - There is a lack of knowledge and understanding of the donation system, as well as an inherent mistrust of the system, which can breed fear and contribute to indecision or an adamant stance against donation.
  - Widespread discomfort with the topic of death/dying is a large barrier to open discussion about organ and tissue donation
  - The most common myth related to donor registration is that doctors won't work as hard to save the life of a registered donor.
  - Once aware of the topic of organ and tissue donation and its issues, three key areas of messaging seemed to resonate most with Ontarians:

    (i) Positive outcome of donation
    (ii) Consequences or impact of inaction
    (iii) Reciprocity – feeling that if you would be willing to accept an organ, you should also be willing to register as a donor

TARGET AUDIENCE

Primary
Ontario residents who are open to organ and tissue donation, with the largest cohort being those who "probably would register" rather than "definitely would register"

Demographics of Ontarians most supportive of organ and tissue donation (as evidenced by their willingness to register):

- Eligible Ontarians aged 16-54 further segmented to include the 34-44 age group
- Household income of approximately $60,000
- Post-secondary education – (College or University)

Secondary
- The "lukewarm" – those who currently show little interest in organ and tissue donation
- South Asian (Hindu, Tamil and Punjabi) communities (as indicated by 2013 research)

STRATEGIC FOCUS

The following five strategies build on TGLN's successes and create a seamless, integrated and comprehensive communications strategy, with a longer-term view focused on building a culture of organ and tissue donation to maximize conversion and yield more organ donors.

1. Encourage culture change by enhancing grassroots advocacy, partnerships and beneficial affiliations to extend TGLN's reach.
2. Optimize media relations and social media as a conduit for demonstrating the value of OTDT.
3. Optimize cost-effective marketing opportunities to promote the value of organ and tissue donation and transplant.
4. Partner and collaborate with ServiceOntario to improve registration opportunities and ensure registration processes are optimal.
5. Enhance corporate communication to support fulfillment of TGLN's objectives and mandate.

SWOT ANALYSIS

Strengths
- TGLN is affiliated with a passionate group of advocates (recipients, donor families) with compelling personal stories to share
- Media interest in organ and tissue donation – the technical marvel of transplantation; the immortal and legacy elements of donation; the personal stories of life/death, suffering, loss, rebirth – is evergreen, affording TGLN opportunity for ongoing media relations
- Top-level buy-in at ServiceOntario continues to result in successful initiatives to increase registration numbers and, ultimately, consent rates
- Registering consent is easy and widely accessible (via Internet and Smartphone)

Weaknesses
- Organ and tissue donation is not top-of-mind nor personally relevant for most Ontarians
- Ontarians see no urgency to register
- Misconceptions and skepticism related to organ and tissue donation are prevalent, amongst the public and the media

- TGLN competes for attention with a wide variety of health-related issues which are much more pervasive and affect many more Ontarians, and whose organizations have larger marketing budgets available
- Current legislation hampers the ability to share personal stories without contravening privacy laws

Opportunities

- The biennial Canadian Transplant Games are being held in Toronto in August 2016 providing another opportunity to focus on the importance and benefits of donation and transplantation in the Greater Toronto Area (GTA), a key region, to further boost donation rates
- Localized data on registration allows TGLN to speak to audiences on a macro and micro level, with tailored messages relevant to the provincial, local or regional population groups
- Government strategy to accelerate conversion of red and white health card is expanding opportunities for registration through SO centres
- Among the culturally diverse populations in the GTA, the South Asian community shows potential to build support for OTD
- TGLN has a significant and engaged social media audience willing to share messages with their networks, providing additional reach and opportunity
- Newly-formed relationships with key government representatives provide ongoing opportunities to reach new constituents and influence decision-making in communities with low registration rates

Threats

- Key communications activities are reliant on provision of one-time funding from MOHLTC, making them difficult to plan and optimize, or not possible if funding is not available
- Some barriers to support for donation – such as avoidance of discussion of death, fear and mistrust of the medical system, and superstition – are difficult to overcome via any communications message or tactic
- The availability of "low hanging fruit" for registration has diminished and targeting Ontarians who are more lukewarm to registration and donation – the "probably would register" group rather than the "definitely would register" group - is more challenging
- Key messaging for the "definitely would register" has been relatively straightforward, whereas messaging to convert harder to reach groups needs to be tested, tailored and repeated in order to motivate
- As the majority of the donor registration process lies with ServiceOntario (SO) and outside TGLN's direct control, changes at SO - such as online driver's licence renewal, and potentially online health card renewal in future - may reduce and/or weaken opportunities for donor registration if it is not integrated as part of the online transaction. Additionally, outages of the ODR directly affect registration volumes

STRATEGIC APPROACH AND HIGH LEVEL TACTICS

STRATEGY 1:

Encourage culture change by enhancing grassroots advocacy, partnerships and beneficial affiliations to extend TGLN's reach and normalize OTDT.

AUDIENCE

- Target, via advocates and partners

APPROACH

Collaboration with advocates and partners is critical to achieving the scope and reach required to encourage culture change in Ontario. In 2016/17 TGLN will aim to streamline the provision of effective materials and messaging to advocates, which they can tailor for local use, as well as information on how

to handle some of the most common and/or problematic questions from the public. TGLN will take a more strategic view to partnerships and seek to engage in projects that hold the most opportunities.

HIGH LEVEL TACTICS

- Implement a streamlined and efficient approach for advocate engagement and communications including community events support
- Leverage the influence and reach of hospitals in our efforts to normalize OTDT
- Capitalize on growing engagement in the GTA South Asian communities
- Expand the capabilities and reach of Service Club partners (ex. Lions)
- Expand opportunities to educate funeral directors and develop them as conduits to reach their clients
- Focus youth outreach on post-secondary students, with an emphasis on influencing future professionals (ex: lawyers, physicians, nurses)
- Maintain and strengthen relationships with elected officials in order to grow their support and understanding of OTD
- Explore family physician opportunities highlighted in 2015/16 research
- Partner with the Organizing Committee of the 2016 Canadian Transplant Games (to be held in Toronto in August 2016) to lever these Games to further boost donation rates in the GTA

STRATEGY 2:

Optimize media relations and social media as a conduit for demonstrating the value of OTDT.

AUDIENCE

- Target, via media and peers/influencers (social sharing)

APPROACH

TGLN will continue to improve and enhance media relations, by addressing myths and misconceptions, building trust in Ontario's donation and transplantation system, and enhancing understanding and knowledge about organ and tissue donation. TGLN will use a core group of spokespersons, including TGLN's CEO, affiliated physicians and, where appropriate, include transplant recipients and donor families. TGLN must also continue to be prepared to capitalize on media interest in OTDT stories which do not necessarily originate from TGLN.

In a restrained fiscal environment, it continues to benefit TGLN's overall goals to make best use of social media as a mean of reaching and engaging with Ontarians. Peer-to-peer sharing of OTDT-related content also works to help normalize and de-stigmatize the issue overall.

HIGH LEVEL TACTICS

- Position and prepare TGLN to respond immediately and strategically (in the media and in social spheres) to capitalize on issues or stories of interest, to correct, educate or add perspective
- Enhance TGLN's proactive media relations program based on 2015/16 results
- Fortify TGLN's position as the go-to media source for information, education and perspective on OTDT issues
- Create effective shareable social media content that extends TGLN's reach and works to normalize OTDT
- Expand TGLN's roster of appropriate and effective spokespeople
- Influence and leverage the media relations activities of partners to benefit TGLN's goals

- Develop and implement an effective media relations plan to maximize positive media attention for the 2016 Canadian Transplant Games (to be held in Toronto in August 2016)

STRATEGY 3:

Optimize cost-effective marketing opportunities to promote the value of organ and tissue donation and transplant.

AUDIENCE

- Target, via marketing opportunities

APPROACH

Applying lessons learned in previous years, TGLN will continue to utilize and enhance cost-effective marketing vehicles. We will also continue to seek effective marketing opportunities which can be made available at low-cost or no-cost via relationships with advocates and supportive partners.

HIGH LEVEL TACTICS

- Evolve and improve TGLN's paid marketing initiatives for maximum benefit, including SEO and paid/promoted social media opportunities
- Undertake development of new creative, based on learnings and results of recent campaigns (contingent on available budget)
- Continue to find strategic marketing opportunities via partners and advocates
- Explore feasibility and potential of other social media platforms to influence culture change and/or drive registration

STRATEGY 4:

Partnership and collaboration with ServiceOntario to improve registration opportunities and ensure registration processes are optimal.

AUDIENCE

- **Key decision-makers at SO**, to ensure that opportunities to increase and/or improve organ and tissue donor registration are considered in program and policy changes
- **SO staff at public and private SO centres within the GTA**, key partners in making the organ and tissue donor registration ask and registering customers
- **SO customers (general public)** visiting SO centres to conduct health card related transactions, renew their driver's licence, or apply for an Ontario identification card

APPROACH

TGLN continues to build a fruitful and productive working relationship with ServiceOntario at all levels, and working groups have been established on key projects. TGLN will continue to collaborate with SO on initiatives that create an increased opportunity for registration through the online, in-person and direct mail channels. SO has proven to be very open to piloting initiatives to test new concepts.

HIGH LEVEL TACTICS

- Advocate and support expansion of organ and tissue donor registration to all citizen-focused transactions at ServiceOntario, where appropriate

- Preserve and integrate registration opportunities as ServiceOntario continues to migrate services online and make other technology advancements
- Continue to leverage as appropriate ongoing plans to accelerate conversion of red and white health cards to maximize the best possible registration outcomes
- Improve and streamline processes to optimize registration through ServiceOntario channels
- Continue to demonstrate and reiterate the life-saving value of organ donor registration to all ServiceOntario staff

STRATEGY 5:

Enhance corporate communication to support fulfillment of TGLN's objectives and mandate.

AUDIENCE

- TGLN staff, stakeholders, partners and the public, via TGLN's leadership team and staff

APPROACH

With its expanded mandate and ambitious goals, efficient and effective corporate communications is essential to reinforce TGLN's leadership and positive reputation amongst stakeholders, partners and the public. Strategic communications counsel and advice, applied at the planning and implementation stages of TGLN projects and programs, will enhance outcomes and position TGLN favourably to all relevant audiences.

HIGH LEVEL TACTICS

- Work to integrate a more cohesive and unified communications approach with stakeholders and partners across the entire organization
- Develop and implement a strategic executive visibility plan for TGLN CEO, as part of TGLN's overall corporate communications plan and in service of TGLN's mandate
- Integrate communications expertise early in the planning and preparation of TGLN communication strategies, plans, products, projects and materials
- Advance and expand issues and crisis management expertise internally, and establish a more structured process for issues management

DONOR REGISTRATION TARGET FOR 2016/17

CONTEXT

- Precise target setting for donor registration is challenging. TGLN is guided by past donor registration results, available resources and results of other jurisdictions to set realistic, measureable targets.

- As registration is a key driver for family consent (families are significantly more likely to give consent for donation if the potential donor is registered), increased registration is an important goal in and of itself. Additionally, registration growth is a useful barometer as to whether efforts to change culture are working

REGISTRATION TARGET FOR 2016/17

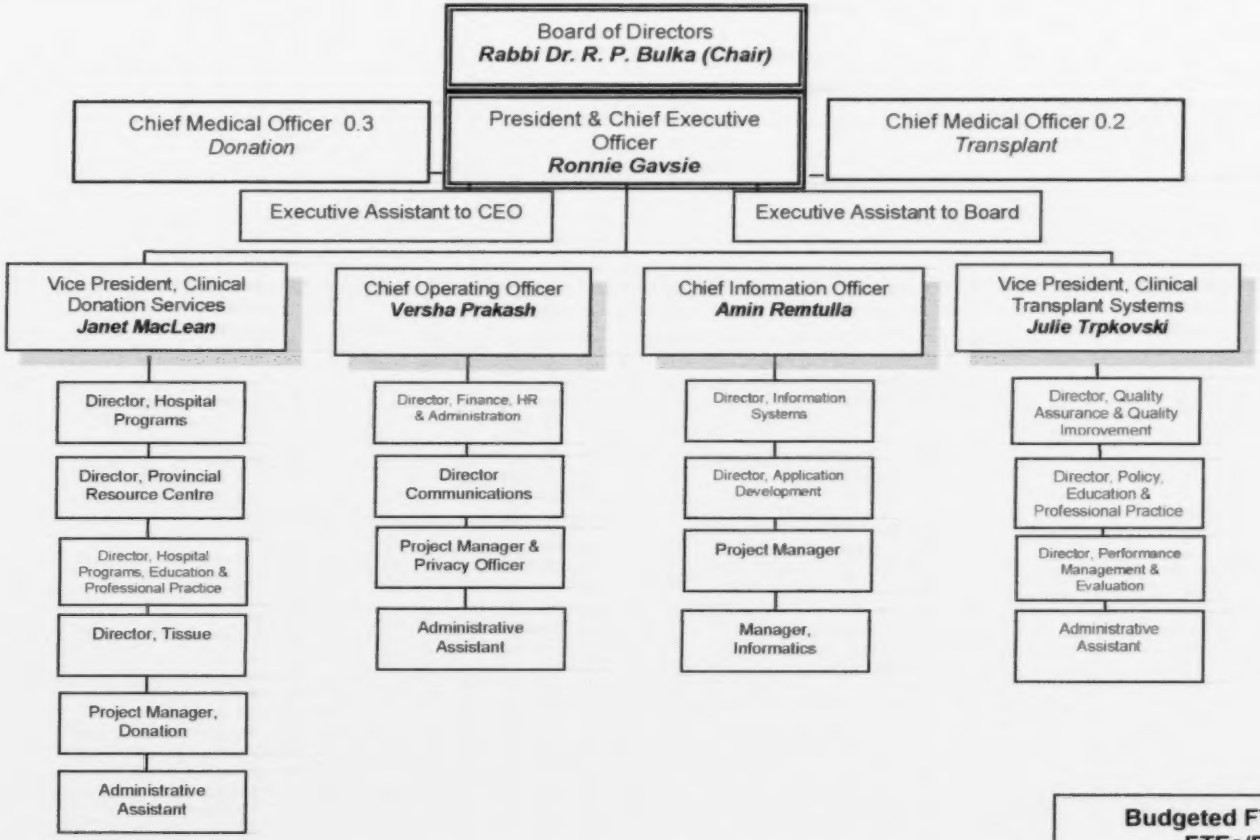
- The target of achieving over 254,000 registered donors assumes a 5% gain on the average number of new registrations per year over the past five years. The target is set as a minimum

number of new donor registrations that TGLN in collaboration with its partners will work to achieve in 2016/17.

- This target is based on many considerations including:
  - continued conversion of red and white health cards
  - restrained fiscal environment for paid marketing
  - those willing to register now form a smaller portion of the unregistered population in Ontario
  - Encouraging the pool of undecided and unwilling is far harder to achieve

Organizational Chart

(As of July 2014)



Budgeted FTEs 190.7
FTEs/PTEs
Casual staff excluded

Staff Numbers

SUMMARY OF CURRENT TGLN BUDGETED STAFF POSITIONS – 2015/16

POSITIONS	# FTE
OFFICE OF THE PRESIDENT	
President and Chief Executive Officer	1.0
Executive Assistant to CEO	1.0
Chief Medical Officer – Donation	0.3
Chief Medical Officer – Transplant & Organ Specific Leads	0.2
Chief Information Officer	1.0
Administrative Assistant, CMO	1.0
Executive Assistant to Board	1.0
Total	**5.5**
CLINICAL OPERATIONS	
Vice President, Clinical Donation Services	1.0
Administrative Assistant	1.0
Project Manager	1.0
Total	**3.0**
HOSPITAL PROGRAMS & EDUCATION	
Director Hospital Programs, Education & Professional Practice	1.0
Administrative Assistant	1.0
Hospital Development Coordinators	6.0
Health Information Management Specialist	1.0
Health Record Reviewer	1.0
Educators	3.0
Total	**13.0**
HOSPITAL PROGRAMS	
Director, Hospital Programs	1.0
Manager, Hospital Programs	1.0
Organ and Tissue Donation Coordinators	23.2
Family Discussion Coordinator	1.0
Total	**26.2**
PROVINCIAL RESOURCE CENTRE	
Director, Provincial Resource Centre	1.0
Administrative Assistant	1.0
Manager, PRC – Organ	1.0
Clinical Specialist, Organ	1.0
Clinical Services Coordinators	16.0
Surgical Recovery Coordinators	6.5
Referral Triage Coordinator	4.0
Information Coordinator – Organ	1.0
Total	**31.5**
TISSUE PROGRAM HEALTH	
Director, Provincial Resource Centre - Tissue	1.0
Administrative Assistant	1.0
Manager, PRC – Tissue	1.0
Clinical Specialist, Tissue	1.0
Tissue Recovery Supervisor	1.0
Outreach Coordinator	1.0

Information Coordinators	2.0
Tissue Coordinators	21.0
Total	**29.0**
OPERATIONS	
Chief Operating Officer	1.0
Administrative Assistant	1.0
Project Manager & Privacy Officer	1.0
Total	**3.0**
COMMUNICATIONS & FAMILY SERVICES	
Director Communications	1.0
Manager, Communications	1.0
Sr. Media Relations Advisor	1.0
Volunteer Services Advisor	1.0
Communications Advisors	2.0
Communications Coordinator	1.0
Digital Media Advisor	1.0
Communications Assistant	1.0
Information Services Coordinator	1.0
Family Services Advisors	2.0
Family Services Assistant	0.5
Total	**12.5**
FINANCE, HUMAN RESOURCES AND ADMINISTRATION	
Director, Finance, Human Resources & Administration	1.0
Human Resources Manager	1.0
Finance Manager	1.0
Senior Financial Analyst	1.0
Procurement Specialist	1.0
Human Resources Generalist	1.0
Human Resources Coordinator	1.0
Payroll Specialist	1.0
Accountant	1.0
PRELOD & TPER Administrator	1.0
Accounting and Payroll Assistants	2.0
Receptionist	1.0
Total	**13.0**
IT	
Director, IT	1.0
Project Manager	1.0
Director, Application Development	1.0
Manager, Informatics	1.0
Programmers	4.0
Senior Health Informatics Analysts	2.0
Cognos and Data Warehouse Specialist	1.0
Health Informatics Analyst	1.0
Senior Network Administrator	1.0
Network Administrator	1.0
Change Control & Infrastructure Lead	1.0
Database Administrator	1.0
Business Systems Analyst	1.0
Software Quality Analysts	3.0
Application Development Lead	1.0

Junior Business Analyst	1.0
Helpdesk Technician	2.0
Informatics Specialist	1.0
Data Warehouse Developer/Modeller	1.0
Data Quality Specialist	1.0
SharePoint Developer	1.0
Oracle Developer Lead	1.0
Business Analyst	1.0
Total	***30.0***
TRANSPLANT	
Vice President, Clinical Transplant Systems	1.0
Administrative Assistant	1.0
Directors, Transplant	2.0
Project Analysts, Transplant	4.0
Project Managers, Transplant	3.0
Manager, Transplant	1.0
Clinical Expert Liaisons	5.0
Research Analyst, Transplant	1.0
Total	***18.0***
QUALITY	
Director, Quality Assurance & Performance Improvement	1.0
Clinical Quality Specialist	1.0
Quality Engineer	1.0
Quality Analysts	2.0
Quality Compliance Coordinator	1.0
Total	**6.0**
TOTAL BUDGETED POSITIONS	**190.7**

Performance and Directional Indicators & Targets

TGLN SCORECARD

Performance Indicator	Definition	2016/17 TGLN Target
Objective 2: Achieve 58-61% provincial conversion rate, 271-290 organ donors and 3.57 organ yield per donor.		
Conversion Rate	Actual donors of all ages divided by medically eligible deaths	58-61%
Deceased Organ Donors	Number of deceased organ donors	271-290
Organ Yield	Number of organs recovered and transplanted from organ donors	3.57
Objective 3: Achieve 44% consent rate, 2,200-2,400 ocular donors and 330-350 multi-tissue donations.		
Tissue Consent Rate	Cases where tissue consent is obtained from all those approached	44%
Number of Ocular Donors	Number of ocular donors	2,200-2,400
Number of Multi-Tissue Donations	Number of tissue donors who donated one or more of the following tissue types: skin, heart valves, bone and/or connective tissue	330-350
Objective 4: Emphasize the value of OTDT to all Ontarians through outreach and communications and inspire over 254, 000 to register consent.		
Donor registration in MOHLTC's Database	Number of additional donor registrations in MOHLTC's database	254, 000
Objective 7: Attract, engage, develop and retain talented staff.		
Total Turnover	Number of total staff departures/Average number of staff	13%

Appendix 1: 2016/17 TGLN Financials

Trillium Gift of Life Network
Summary of Consolidated Operating Budget and New Budget Requests
For Fiscal Years 2015/16 to 2016/17

	APPROVED BUDGET	
	Fiscal Year 2015/16	**Fiscal Year 2016/17**
SUMMARY OF BASE FUNDED OPERATIONS:		
Base Salaries	15,772,630	15,772,630
Hospital Program On Call and Call Back Costs	834,037	834,037
Benefits	3,228,823	3,228,823
Other Operating Expenses	8,503,710	8,503,710
Administrative Efficiencies	(252,800)	(252,800)
SUB-TOTAL	**28,086,400**	**28,086,400**
MANAGED FUNDS		
Deceased Organ Donor	2,272,900	2,272,900
PRELOD	500,000	500,000
TPER	250,000	250,000
Transportation Services to Support Organ & Tissue Donation	3,178,000	3,178,000
SUB-TOTAL	**6,200,900**	**6,200,900**
SUB-TOTAL BASE FUNDED OPERATIONS	**34,287,300**	**34,287,300**
ANTICIPATED ADDITIONAL BASE FUNDING:		
Operations	418,700	466,800
Physician Services	257,200	502,000
Clinical Services & Hospital Programs	261,800	498,600
Provincial Resource Centre - Organ	240,200	288,300
Provincial Resource Centre - Tissue	339,000	532,000
Standard Acquisition Fees	262,500	262,500
Administrative Efficiencies	(80,000)	(80,000)
Sub-Total Anticipated Additional Base Funding	1,699,400	2,470,200
REVISED MOHLTC BASE FUNDED OPERATIONS BUDGET	**35,986,700**	**36,757,500**

ANTICIPATED ADDITIONAL 2015/16 ONE TIME FUNDING:		
Clinical Education	485,000	0
RegenMed	680,000	0
SUB-TOTAL MOHLTC ONE-TIME FUNDED PROGRAMS	**1,165,000**	**0**
TOTAL EXPENDITURE BUDGET	**37,151,700**	**36,757,500**